

Please print or type. Form designed for use on elite (12-pitch typewriter).

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>CAD086510005</b>		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address <b>Douglas Aircraft Company Attn: R. Tuell M/S C6-10 19503 S. Normandie Avenue, Torrance, CA 90502</b>						A. State Manifest Document Number <b>90378960</b>							
4. Generator's Phone <b>213-533-7926 or 213-533-7231</b>						B. State Generator's ID <b>HAHQ36005693</b>							
5. Transporter 1 Company Name <b>Pacific Environmental Mgmt.</b>						C. State Transporter's ID <b>207783</b>							
6. US EPA ID Number <b>CAD082053779</b>						D. Transporter's Phone <b>213-324-2445</b>							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address <b>Norris Industries 5215 S. Boyle Avenue Los Angeles, CA 90058</b>						G. State Facility's ID <b>CAD097030993</b>							
10. US EPA ID Number						H. Facility's Phone <b>213-588-7111</b>							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. <b>RQ, Waste, Cyanide Solution Poison B, UN1935 (Cyanide)</b>						No.		Type				State	
						001		TT		G		711	
												EPA/Other	
												State	
												EPA/Other	
b.												State	
c.												State	
d.												State	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a) <b>Waste Cyanide solution from Bldg 2 Patio Tank Cyanide 0-5% Copper 0-1% Water 95-100% Cadmium 0-1%</b>						a. <b>15</b>							
Acceptance # <b>E-1062CN1</b>						b.							
15. Special Handling Instructions and Additional Information						c.							
In case of accident contact Chemtrec at 800-424-9300. Do not breathe vapors, do not wash into sewer or waterway. If unable to deliver, return to generator. Volume is approximate. DOT Emergency Response Guide # 55. <b>EH Permit # 4 70051602</b>						d.							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name <b>Daniel P. ...</b>						Signature <b>Daniel P. ...</b>						Month Day Year <b>12/15/91</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name <b>Daniel P. ...</b>						Signature <b>Daniel P. ...</b>						Month Day Year <b>12/15/91</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature						Month Day Year	
19. Discrepancy Indication/Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name <b>BI TIN VELASCO</b>						Signature <b>Bi Tin Velasco</b>						Month Day Year <b>12/15/91</b>	

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

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USE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RT

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law.						
3. Generator's Name and Mailing Address Compass Aircraft Company Attn: R. Smith 4/S 08-10 11003 S. Normandie Avenue, Torrance, CA 90502						A. State Manifest Document Number 90378960								
4. Generator's Phone (213) 533-7928 or 213-534-7231						B. State Generator's ID H A H Q 3 6 0 0 9 0 9 4								
5. Transporter 1 Company Name Pacific Environmental Mgmt.						6. US EPA ID Number C A D B 3 E D 5 6 7 7 4		C. State Transporter's ID						
7. Transporter 2 Company Name						8. US EPA ID Number		D. Transporter's Phone 213-324-2445						
9. Designated Facility Name and Site Address Morris Industries 3115 S. Boyle Avenue Los Angeles, CA 90056						10. US EPA ID Number C A D B 3 E 7 0 0 6 4 M 3		E. State Transporter's ID						
								F. Transporter's Phone						
								G. State Facility's ID						
								H. Facility's Phone 213-538-7111						
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity						
a. Waste, Cyanide Solution Poison 3, UN1935 (Cyanide)						0 0 1 1 1 1		14. Unit Wt/Vol						
b.								I. Waste No. State 711 EPA/Other E007 State						
c.								EPA/Other						
d.								State EPA/Other						
J. Additional Descriptions for Materials Listed Above a) Waste Cyanide solution from Bldg 2 Patio Tank Cyanide 0-5% Copper 0-1% Water 95-100% Cadmium 0-1% Acceptance # E-1062CN1						K. Handling Codes for Wastes Listed Above a. b. c. d.								
15. Special Handling Instructions and Additional Information In case of accident contact Chemtrac at 800-424-9360. Do not breathe vapors. Do not wash into sewer or waterway. If unable to deliver, return to generator. Volume is approximate. DOT Emergency Response Guide 4 55.														
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Printed/Typed Name					Signature					Month Day Year				
17. Transporter 1 Acknowledgement of Receipt of Materials														
Printed/Typed Name					Signature					Month Day Year				
18. Transporter 2 Acknowledgement of Receipt of Materials														
Printed/Typed Name					Signature					Month Day Year				
19. Discrepancy Indication Space														
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.														
Printed/Typed Name					Signature					Month Day Year				



P.O. Box 77 Wilmington, California 90748-0077  
Tel: (213) 324-2445 Fax: (213) 538-9329

# DRIVERS REPORT

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DATE	DEPART TERM.	ARRIVE JOB	DEPART JOB	T SDF	LUNCH/DOWN	STOP TIME	TOTAL TIME
	A	A	A	IN		A	
	P	P	P	OUT		P	

DRIVERS SIGNATURE \_\_\_\_\_ CUSTOMER SIGNATURE \_\_\_\_\_

I hereby certify to U.S. Pollution Control, Inc. (USPCI) that the hazardous waste identified in this certification meets the applicable treatment standards set forth in 40 CFR 268 Subpart D, and the applicable prohibition levels set forth in Sec. 268.55 or in RCRA Section 3004(d). For wastes with treatment standards expressed as concentrations in the waste extract (Subsection 268.41), the owner or operator of the treatment facility must test the treatment residues according to the waste analysis plan using the Toxicity Characteristic Leaching Procedure (TCLP) described in Appendix II of 40 CFR Part 261 to assure that the treatment residue extract meets the applicable treatment standards found in Table OCWE. For wastes with treatment standards expressed as waste concentrations, the owner or operator of the treatment facility must test the total treated waste matrix for the constituents specified in Table OCW of Sec. 268.48.

USPCI Acceptance Number: \_\_\_\_\_

Manifest Number Associated With Waste Shipment: \_\_\_\_\_

**NOTICE: THIS SECTION MUST BE COMPLETED.**

Base for this certification-Describe the knowledge upon which the certification is made and attach the most recent analytical data:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PUT INITIALS IN BLOCK FOR APPROPRIATE CERTIFICATION**

- ☐ 1. **GENERATOR'S CERTIFICATION (268.70)(2)(C)**  
I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.55 or RCRA Section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- ☐ 2. **PERFORMANCE STANDARDS (40 CFR 268.70)(2)(B)**  
I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.55 or RCRA Sec. 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- ☐ 3. **TECHNOLOGY STANDARDS (40 CFR 268.70)(2)(B)**  
I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.48. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- ☐ 4. **CONCENTRATION-BASED CERTIFICATION FOR INCINERATION/FUEL SUBSTITUTION RESIDUES (268.70)(2)(C)**  
I certify under penalty of law that I have personally examined and am familiar with the technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonaqueous organic constituents have been treated by incineration in units operated in accordance with 40 CFR part 264, subpart C or 40 CFR part 265, subpart C, or by combustion in fuel substitution units operating in accordance with applicable technical requirements, and all have been unable to detect the nonaqueous organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Are there any constituents which do not meet applicable land disposal restriction treatment standards?

☐ yes ☐ no

If yes, please list the constituents which require further treatment:

Waste Code	Constituent(s)

*x* Robert G. Tuell, Jr. *x* Sr. Plant Engr. *x* 213) 533-7926  
*x* Robert G. Tuell, Jr. *x* 04-26-91  
Signed (Authorized Signature of Generator or TSP) \_\_\_\_\_  
Date \_\_\_\_\_

DOT/PAJ/VEN